

Boardtalk

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President's Report

The inaugural swearing of the oath for Graduates in Veterinary Science from Sydney University was conducted in December 2007. As part of the graduation ceremony in the Great Hall I was privileged to administer the oath on behalf of the Veterinary Practitioners Board of NSW. The proceedings were opened by the Chancellor, Her Excellency, Professor Marie Bashir, AC CVO.



It was very inspiring to experience the enthusiasm of the students as they took the oath. In addition I was moved to find that colleagues present who had graduated from Sydney University in previous years also stood and swore the oath at this the first opportunity to do so.

Professor Bashir, who joined members of the faculty at the veterinary school afterwards, mentioned that this was the last graduation ceremony for 2007 and she found the swearing of the oath by the veterinary graduates added a valuable additional quality to the graduation ceremony. The Oath can be found in The University of Sydney article in this edition of Boardtalk.

Already the first quarter of 2008 has gone and therefore it is now time for all registered practitioners to complete and submit this year's annual return. This edition of Board Talk includes some statistical charts created from the 2007 Annual Returns.

It is very interesting to see the demographic data that has become available as a result of the introduction of all registered veterinarians completing the annual return. No doubt this information will prove helpful to those looking at the emerging issues that the profession will face in

the future, not least of which will be the impact of the opening of three new veterinary schools.

The Australasian Veterinary Boards Council (AVBC) held a strategic planning meeting in November last year and has identified a need for a forum where the emerging issues facing veterinary education can be discussed and debated. As the registration boards are major stakeholders in regard to the standards of veterinary education, the AVBC agreed to provide the umbrella for this forum and the first meeting will be in April this year. While the Veterinary Schools Advisory Accreditation Committee (VSAAC) conducts visitations to veterinary schools (and has a rigorous policy and procedures manual for those visits) there is a need for a forum to develop the higher level policies on veterinary education within Australasia.

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President's report continued

As Charles Sturt (Wagga), James Cook (Townsville) and Adelaide (Roseworthy) start to deliver clinical training to their students in the next two years even the ability to find sufficient skilled teachers to deliver that training may become a problem. When they are producing graduates there will be approximately another 180 new graduates added to the current number of 500 each year.

Many factors, such as the international recognition of Australasian graduates and overseas students come into play. However, at least in NSW we will have some data available on which to identify the impacts and therefore help planning for the future.

Garth McGilvray,
President.

This Oath is the professional commitment being made by graduates today and it may well help us all to reflect for a few moments on the standards that we are expected to uphold as members of our profession.

The Oath for Graduates in Veterinary Science at The University of Sydney

'I solemnly swear to practise veterinary science ethically and conscientiously for the benefit of animal welfare, animal and human health, users of veterinary services and the community. I will endeavour to maintain my practise of veterinary science to current professional standards and will strive to improve my skills and knowledge through continuing professional development. I acknowledge that along with the privilege of acceptance into the veterinary profession comes community and professional responsibility. I will maintain these principles throughout my professional life'.

From the Registrar's Desk

At this time of year, the focus for the Board's staff is to review and improve numerous procedures relating to registration renewal payments, veterinary hospital licence renewals and submissions of the Annual Return (AR).

Last year was the first time that we introduced 'on line' electronic payment methods using a credit card and B Pay. The feedback that I have received has been very positive due to the ease of use of these payment methods. I have taken note of suggestions to improve these processes and many have been introduced this year (see below).

In order to maintain registration as a veterinary practitioner in NSW, the registration renewal payment and AR must be submitted (hopefully together!).

Both payment and submission of the AR can be performed simultaneously via the Board's website. Of course we still accept postage or fax of payment and AR.

Please keep in mind that this is the first year in the 3 year Continuing Professional Development (CPD) cycle. You may recall that the Veterinary Practice Act required the Board to collect CPD points this time last year but they were not recorded on your personal file. This year we will record the reported structured and non structured points that have been achieved during the return period (1 April 2007 – 31 March 2008).



Clare Nathan, our 'IT genius' on staff, has developed the CPD diary as an excel spreadsheet. It is posted on the Board's website. The spreadsheet can be downloaded and saved onto your personal computer - it calculates the running total of both the structured and unstructured points and cleverly carries the points forward to the next month.

Other improvements made to our processes are:

- A copy of your completed electronic AR is able to be printed from the website (for your own records if you want).
- The website payment confirmation screen has been improved and now clearly indicates when payment has been successful.
- For those who are not 'E savvy', we have provided every practitioner with a unique 'website reference number', which is to be entered on the screen when making a payment or submitting the AR – this number is printed on your invoice and AR that was posted to you.

I welcome feedback from the profession regarding any Board process that you believe can be improved – I am available during office hours Monday to Friday on 9699 4477.

Glenn Lynch
Registrar

Signing Veterinary Documents

The December 2007 Boardtalk informed the profession of the Board's new policy relating to the signing of veterinary documents. The policy states that ALL signed veterinary documents must include the practitioner's unique registration number, preceded by the letter 'N' to indicate New South Wales.

The Board recognises that this practise will take some time to become routine but reminds the profession that they are expected to place their registration number beside their signature when signing ANY veterinary documentation as a veterinary practitioner.

The Board is very pleased to see that, since December 2007, most applications that the Board has handled have been complete with the practitioner's number [with the letter N] beside their signature.

For those who are not yet in the habit, please get started today on the next vaccination certificate or on the next insurance certificate...whatever you are signing in your role as a registered veterinary practitioner. The registration renewal invoice and Annual Return posted to practitioners, has the registration number at the top – write it down if you can't remember it.

The registration number is a method of accurately identifying the practitioner who has signed the document.

All registered practitioners are listed on the Board's website, available under the 'vetsearch' button. Their registration number and contact details (provided by the practitioner) are available by using the search facility. The Board requests practitioners check that the contact details on the website are correct. The website is updated daily.

New Registration Category - 'Secondary' Registration

The Board has introduced another category of veterinary practitioner registration, that is, 'secondary registration'. The Veterinary Practice Act 2003 allows the Board to introduce this category; whereas the previous legislation (Veterinary Surgeons Act 1986) did not.

Secondary registration is the same as full registration (or primary registration), however, to be eligible, these practitioners need to demonstrate that they reside outside of New South Wales in another Australian jurisdiction (not overseas) AND they are currently registered with the veterinary Board where they reside.

Several of the other veterinary Boards across Australia already have secondary registration and the cost of annual secondary registration in New South Wales is \$120 per year.

Practitioners that currently reside outside NSW have just been offered secondary registration and they must declare that they are eligible. They are required to inform the NSW Board the name of the primary veterinary Board where they are registered and their registration number. The NSW Board will cross reference to ensure this information is accurate.

Secondary registration acknowledges that the practitioner already pays an annual registration fee to another registration Board and this NSW Board initiative could benefit up to 375 practitioners that we know, reside in another Australian jurisdiction.

This category will be of particular interest to practitioners who live and work close to our borders of Victoria, South Australia, the Australian Capital Territory and Queensland and practitioners who travel for their work such as equine practitioners and specialists. Secondary registration also aims to break down the financial disincentive / barrier of registering in NSW.

The Board will lose up to \$43,000 in annual registration fees if all 375 practitioners are also registered in their State or Territory of residence.

When National Recognition of Veterinary Registration (know also as National Registration) comes into effect (hopefully in the next year or two), the Board may potentially lose another \$44,000 per year in revenue from these practitioners.

The Board will absorb both loses at this time and does not propose to increase general registration fees to cover these loses.

Veterinary Medicines Update

Lee Cook

Department of Primary Industries

Antibiotic residues in dairy calves

There were three violative residues detected in bobby calves in NSW in the latter part of 2007. In two of these cases the owners, when initially contacted, indicated that the antibiotic tablets supplied by veterinary practitioners had not previously been used by them and both indicated that they did not know that a withholding period (WHP) applied. More particularly, they indicated that the supplying practices did not specifically advise them of the WHP or the need to follow it (although it appears there was a WHP on the product labels). Subsequent investigation also indicated incorrect management on-farm.

It does appear that the dairy industry needs to improve its internal communication in relation to (bobby) calf treatments. But practitioners, as the gatekeepers of prescription animal remedies, should ensure that they routinely advise clients to whom they supply treatments to which a WHP applies of the need to identify the treated animals and observe the necessary WHP. This information is required to be written on the dispensing label or a separate advice note if there is no product label with a WHP on it when the product is dispensed/supplied.

In the case of male bobby calves, which are routinely sold at 1-3 days of age, using or supplying treatments with a 14 day WHP is generally inappropriate.

Suspension of veterinary disinfectant

The Australian Pesticides and Veterinary Medicines Authority (APVMA) has notified suspension of the registration of Vetkleen Veterinary Disinfectant (No. 59615) because the "product is not efficacious". If you have stocks of this product they can be returned to the manufacturer Twenty First Decwood Pty Ltd.

NSW Health Poisons Information

The Department of Health has a publication, Guide to Therapeutic Goods and Poisons Legislation for Veterinary Surgeons, which contains information useful to all practitioners in relation to how that Department controls drug supply and labelling (especially prescriptions, dispensing labels and recording S8 information). While it is somewhat out of date (2003) it is worth checking in relation to these requirements and is available on the web at:

http://ambulance.nsw.gov.au/PublicHealth/Pharmaceutical/pdf/poisons_veterinary.pdf.

Note that the guide indicates that dispensing labels are required on all containers of S4 products dispensed by a practice.

Steroids

The above Guide also covers the prohibition on the supply of injectable anabolic steroids and testosterone which is enforced by NSW DPI. Practitioners should note that the prohibiting Order does not apply any controls to oral (tablet or paste) steroid products. The only controls applying to these are the usual S4 controls administered by NSW Health. See the controlling Order on the DPI website at:

http://www.dpi.nsw.gov.au/_data/assets/pdf_file/0008/53756/injectable-steroids-order.pdf.

A proposal by Greyhounds Australasia Ltd to enforce a ban on the use of testosterone for oestrus suppression in racing bitches has been deferred by them, and the NSW Greyhound and Harness Racing Regulatory Authority, until at least 1 July 2008. In addition, problems have now arisen with the supply of the tablet form of the ethyloestrenol treatment approved for this purpose.

Access to veterinary practice records

NSW DPI may seek access to practice records in relation to stock medicines for the purposes of injectable steroid audits or for other purposes. Practitioners are advised that under Section 54 of the NSW Stock Medicines Act 1989 an inspector, who will generally not be a veterinarian, may require a buyer or seller of any stock medicine – which includes a veterinarian or veterinary practice – to provide information in relation to the sale. This does not require the approval of the client or the veterinarian and overrides privacy considerations. Failure to provide such advice is a potential offence under the Act.

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Report from the Complaints Subcommittee

The Board consists of eight members; six are practising veterinarians and two are consumer representatives. The Board's Complaints Committee (CC) consists of 3 of the Board members; that is two veterinarians and one consumer representative. The eight members making up the Board rotate equally through the CC at least once during their three year Board appointment.

The CC investigates complaints and may seek external advice to assist as required. When the investigation process is complete, the CC tables a report at the monthly Board meetings where the findings and CC recommendation is discussed. The Board makes the final decision in regard to the complaint.

Since the December 2007 Boardtalk, the Board has made decisions in regard to five complaints. Of these, four complaints were dismissed and in the other complaint, the practitioner was cautioned for inadequate record keeping in regard to clinical examination, dates, drug dosage and weight of the animal. An inspector at the earliest opportunity will examine this practitioner's records.

Another complaint was withdrawn by the complainant after considering the practitioner's response, however, the Board directed the practitioner to review (and change) the technique of cat euthanasia as they considered that intracardiac injection in a non heavily sedated or unanaesthetised cat was not in accordance with current accepted practice.

Breakdown of communications, both verbal and written, has been the root cause of many complaints that have been investigated by the Board - several are investigations still in progress.

Misunderstandings often occur in emotion charged situations and diagnosis, treatment options, risks and probable outcomes need to be clearly given in words that the client understands – give the same meaning in other words if required, even ask them if they understand! Clients also need to understand the level of care an admitted animal will receive in the veterinary hospital over night and if referral for their animal is an option.

One complaint, involving a dystocia in a mare with a dead foal, arose because the owner could not accept, or comprehend, that the best course of action was immediate euthanasia. The practitioner acted correctly, however the complaint illustrates the problems we all face in our daily contact with our patients and clients.

An interesting observation of complaints made to this Board is that more than half involve owners who are not usual clients of the practitioner against whom the complaint is made - sometimes because their usual vet is closed, as they don't consult after hours.

Perhaps this statistic is not significant, but consider that the client may be uncomfortable, or wary of the 'new' vet. The vet may also possibly be overly critical and resentful that this is not one of their usual clients and that they are using their service only as a convenience and they may be problem clients anyway – this situation of mutual antagonism makes for a 'complaint rich environment'! Some clients seem to take the opportunity to 'compare' practitioners – so please be aware of these scenarios. The Board understands these personal issues and it is important for the profession to be aware of this type of human behaviour.

Following on from a complaint from a practitioner, you are reminded that, under the Poisons and Therapeutic Goods Act 1966, the Poisons and Therapeutic Goods Regulation 2002 and the Veterinary practitioners code of professional conduct (20), it is not permissible for lay staff to administer restricted drugs unless under the direct personal supervision of a veterinary practitioner. This prohibits veterinary nurses from vaccinating animals with restricted (S4) vaccines, or administering euthanasia solution, or any other restricted drug, unless a practitioner is present.

The Board is very conscious of the stress and anxiety placed on a practitioner during the complaint handling process and makes every effort to complete the process as quickly as possible, without compromising accuracy and fairness to either party.

Borrowing from a recent special report from the Royal College of Veterinary Surgeons, **'the name of the game is not just to reduce the number of complaints, but to reduce the need for the complaints to be made.'** (Dr Bob Moore- President RCVS).

The report makes the point that 'many complaints could be defused at the start if someone in the practice issued an apology for an unsatisfactory outcome - saying sorry is not an admission of guilt'.

Questions from the Profession & Answers from the Board

Q: I know of cat breeders who buy vaccine through the Internet and give vaccination certificates with kittens they sell. I want the Board to take immediate action and prosecute, as vaccinating is an act of veterinary science.

A: Firstly you need to know what type of vaccine they are buying. If they are buying killed vaccine, there is no breach of legislation. Just as owners and the public are able to buy tetanus toxoid for their horses or vaccination for sheep and cattle, they are permitted to buy and administer to their own animals killed small animal vaccines. As to whether the vaccine is stored and transported adequately or whether it is administered correctly, we are unable to know.

If the certificate they are giving does not use the word 'veterinary', and states simply what they, as a lay person, have done, then they again have not breached any legislation.

Although many clients -and indeed practitioners- look upon a vaccination certificate as being synonymous with a health check, the vaccination certificate is just that - a statement of vaccination, unless otherwise indicated.

If the breeder's certificate uses the term 'veterinary' or implies 'veterinary services' or veterinary practitioner involvement then legislation has been breached. This is indeed very serious.

Veterinary Practice Act 2003 No 87

11 Offence relating to representation of unqualified person to be veterinary practitioner

(1) An individual must not represent himself or herself to be a veterinary practitioner and must not allow himself or herself to be represented to be a veterinary practitioner unless he or she is a veterinary practitioner.

Maximum penalty: 50 penalty units or imprisonment for 12 months, or both.

(2) A person must not represent an individual to be a veterinary practitioner if the person knows, or ought reasonably to know, that the individual is not a veterinary practitioner.

Maximum penalty: 50 penalty units or imprisonment for 12 months, or both.

(3) Without limiting the ways in which an individual can be considered to be represented to be a veterinary practitioner, a representation using any of the following titles, names or descriptions constitutes such a representation:

(a) the title or description "veterinary surgeon", "veterinary practice", "veterinary", "vet" or "animal

doctor", or any abbreviation or derivative of those words, either alone or in connection with any other title or description,

(b) another title, name or description that indicates, or is capable of being understood to indicate, or is calculated to lead a person to infer, that the person is a veterinary practitioner or is entitled to be registered as a veterinary practitioner,

(c) any title, name or description prescribed by the regulations

Q: What is the value of the breeder's 'certificate' if the animal is taken to boarding cattery/kennels?

A: The mandatory code for the care and management of dogs and cats in animal boarding establishments is outlined under different legislation and will be found at <http://www.dpi.nsw.gov.au/agriculture/livestock/animal-welfare/codes/general/aw-code-5>) It states the following:

6.1 Disease Prevention

6.1.1 For dogs, vaccination against distemper, hepatitis, parvovirus and canine cough is required. A current vaccination certificate (certifying that vaccination was done in the preceding 12 months) must be produced for each dog before admission. Checking for heartworm infection is recommended before admission.

6.1.2 For cats, vaccination against feline infectious enteritis and feline respiratory disease is required. A current vaccination certificate (certifying that vaccination was done within the preceding 12 months) must be produced for each cat before admission.

So clients who board their animals will be required to present a current vaccination certificate for the diseases listed above in the legislation. It is unlikely boarding establishments would accept a 'certificate' from a non-veterinarian

Q: Dear Veterinary Practitioners Board,

I teach in the NSW TAFE system and am currently teaching Certificate IV Veterinary Nursing. A quick question - hope you can help me. Can nurses sign vaccination certificates on behalf of Veterinary Practitioners? I thought not, however when I posed this question to the class, I was surprised at how many students put their hands up to say that they do this! Can you clarify the situation please?

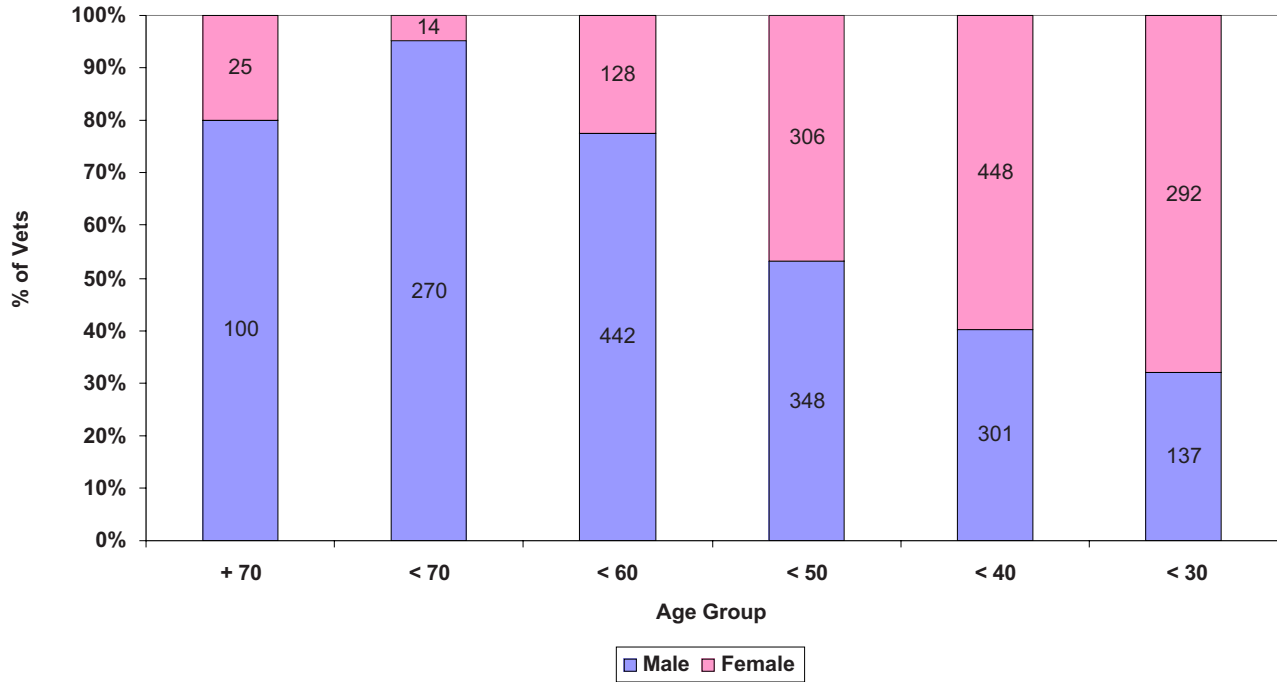
A: NO.

(continued on page 11 after the colour supplement)

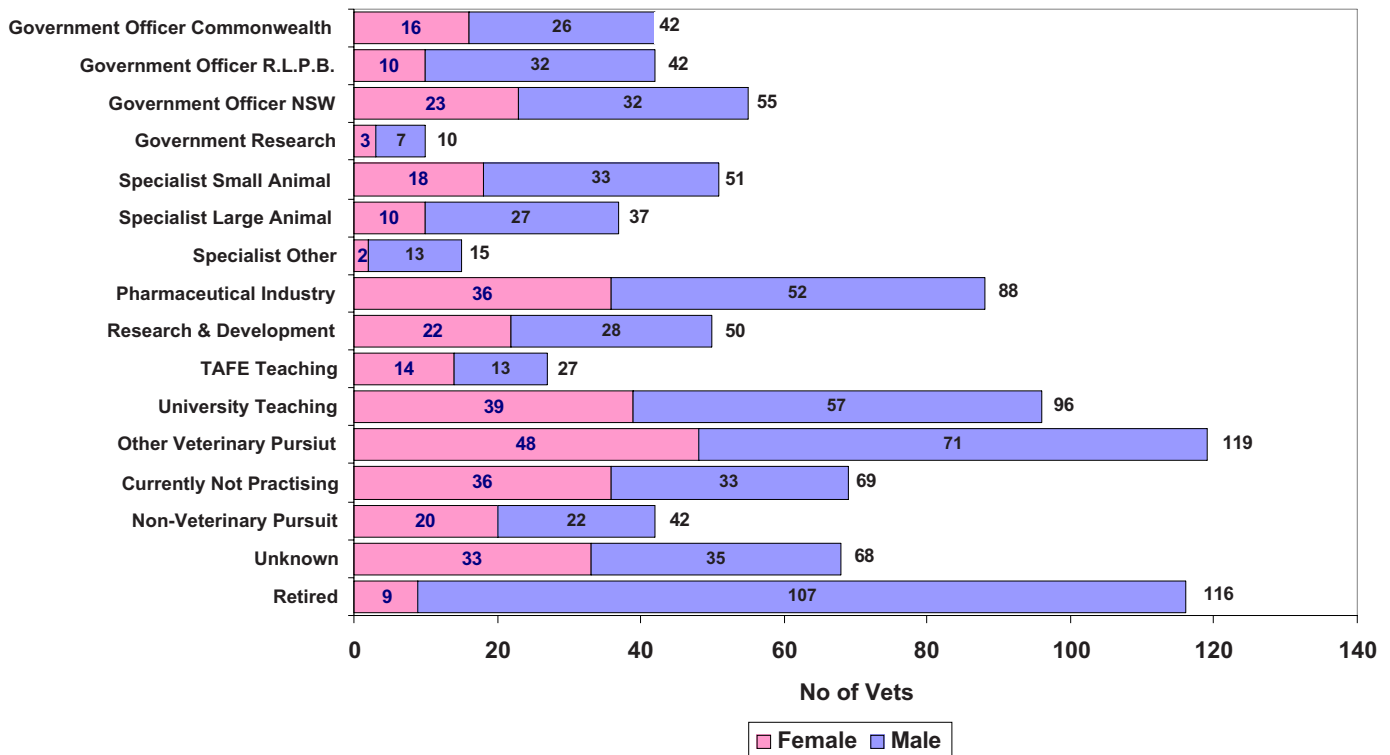
Statistical Information

The following information has been collected by the Board from the 2007 Annual Returns and provide an interesting overview of the profession.

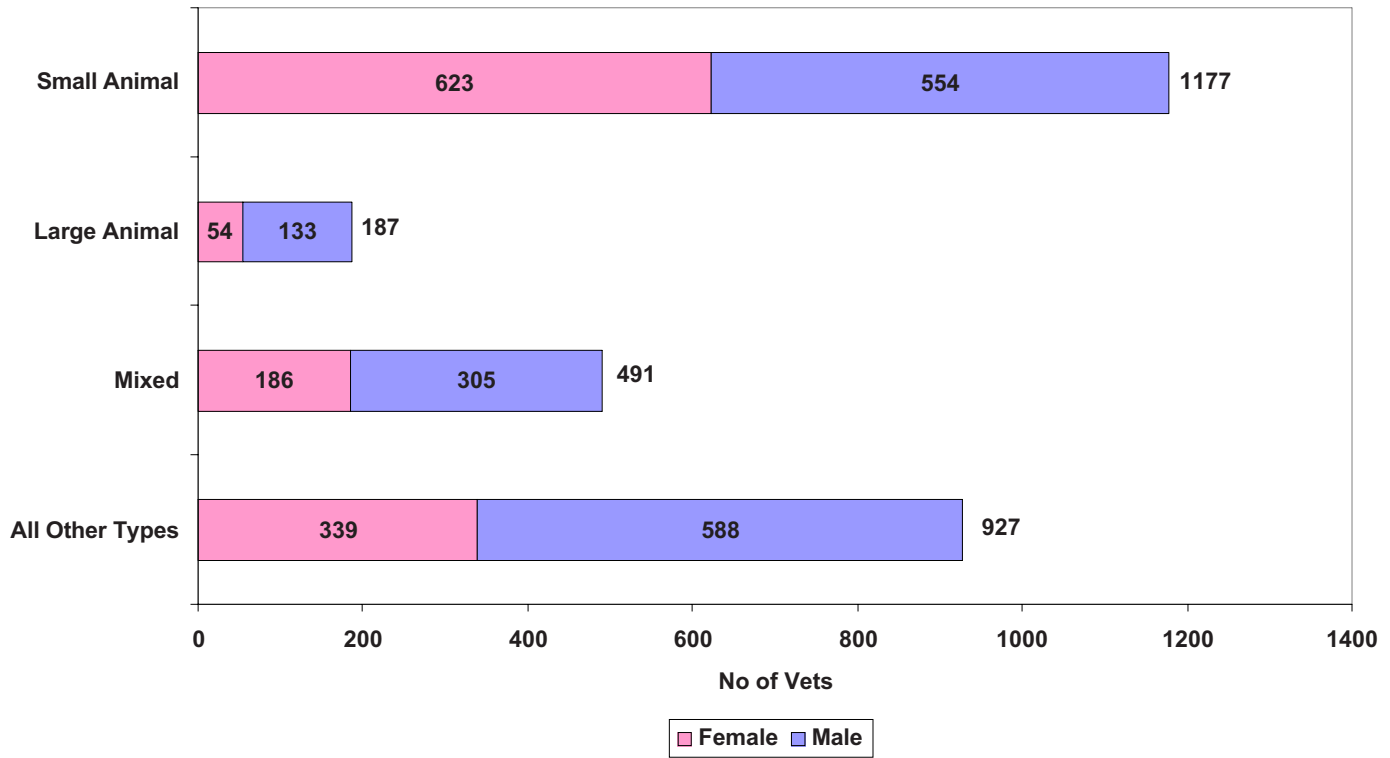
Gender Trend



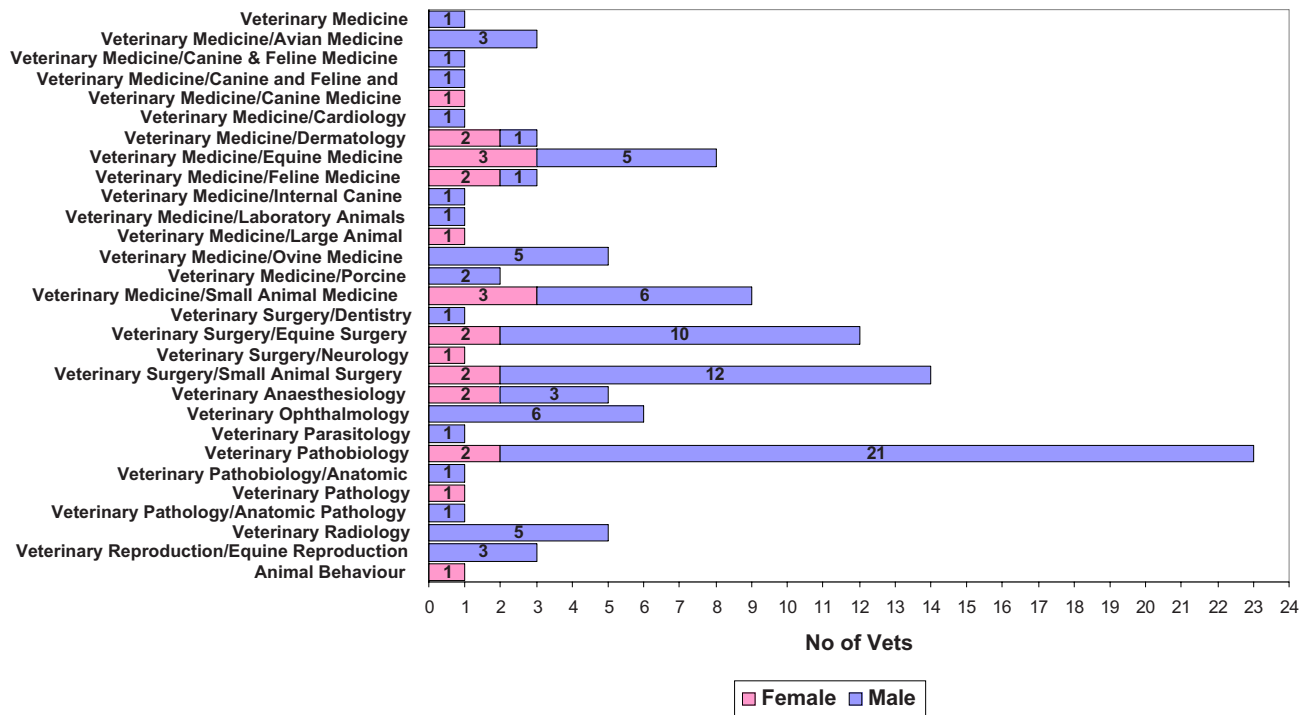
Employment Types - Not in Private Practice



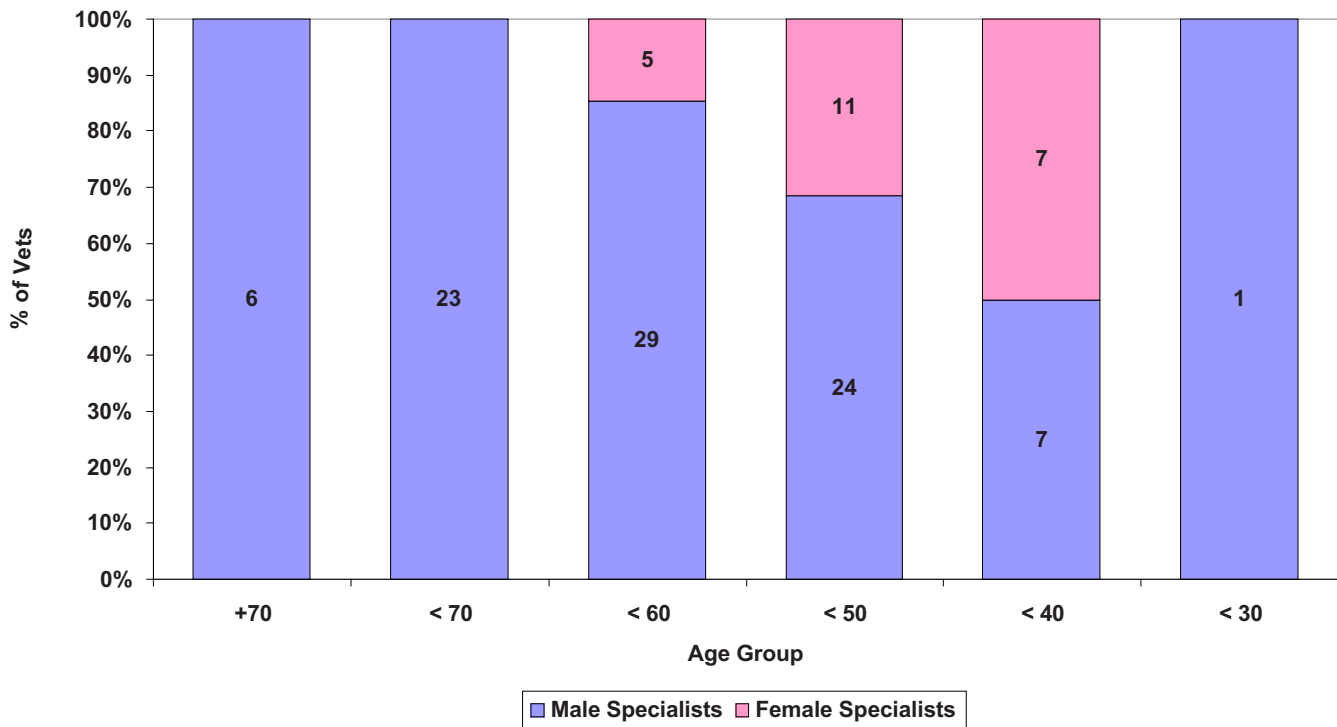
Employment Types - Private Practice



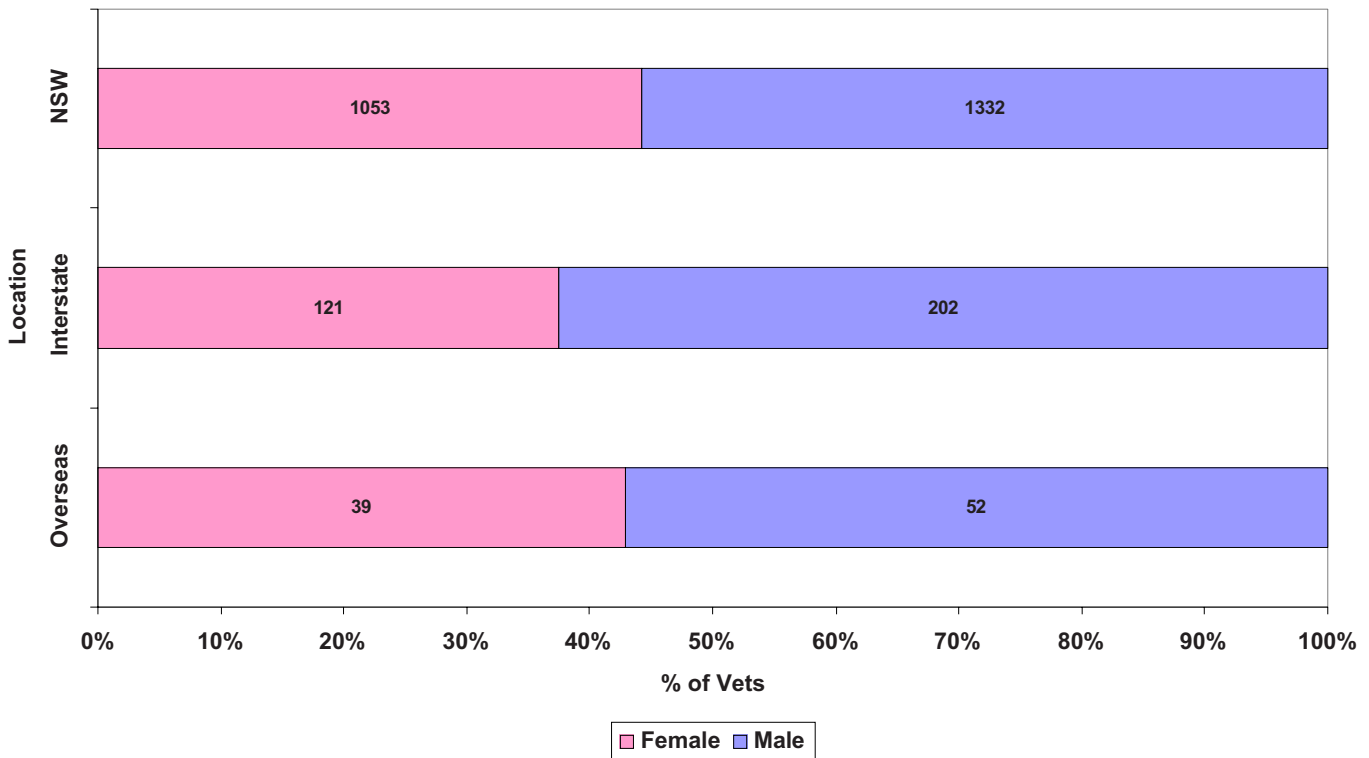
Veterinary Specialisation



Specialists Gender Trend



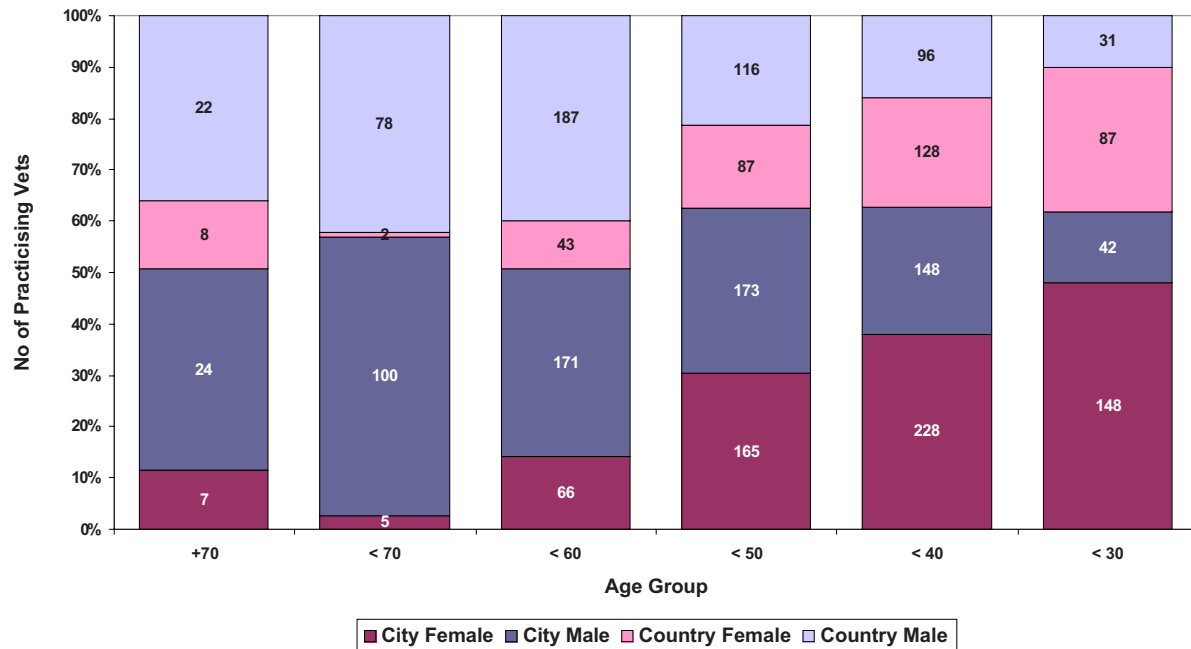
Distribution of Vets



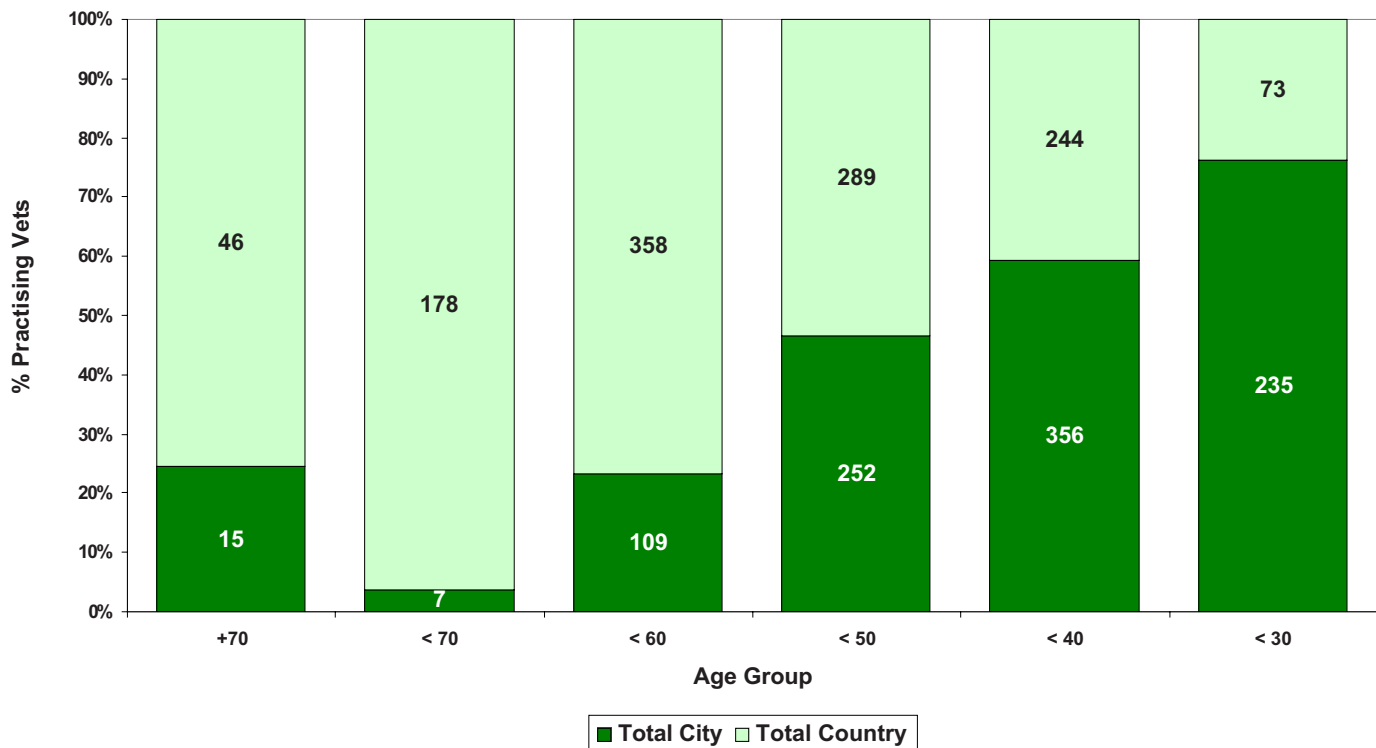
City vets are determined from a list of post codes from Australia Post, which groups postal codes into the following "city" areas:

- Sydney and Suburbs
- Newcastle and Central Coast
- Wollongong

Practising Vets - City vs Country Spread



Country v City Practising Vets Trend



If your vaccination certificate is a Veterinary Certificate it will have

- the name and contact details of the veterinary practitioner who issued the certificate

- the name of the owner of the animal at the date of the certificate

- identification of the individual or litter [including date of birth]

- information to identify which of the pups or kittens in the litter the certificate relates to (if there was more than one born) e.g. distinguishing marks, colour or numerical record.

- The signature of the veterinary practitioner who administered the vaccine. [And now the registration number as well]

Your signature on a vaccination certificate confirms the animal described on the certificate is in fact the animal you examined and then

vaccinated. It is absolutely unacceptable to sign a certificate that may have nothing else on it or just the name of the dog or just the name of the breeder.

As mentioned in Boardtalk previously, if veterinary certificates signed by a nurse were to be presented before the Board, a very serious view would be taken of this unacceptable behaviour and the Board would allege ‘unsatisfactory professional conduct’.

Veterinary Practice Regulation 2006

Schedule 2 Veterinary practitioners code of professional conduct (Clause 13)

17 Certification by veterinary practitioners

(1) A veterinary practitioner must not certify to any fact within his or her professional expertise or knowledge, or that a veterinary service has been provided, unless the veterinary practitioner has personal knowledge of the fact or has personally provided, or supervised the provision of, the veterinary service concerned.

Radiographs

Your radiographs are an essential part of your records. Whenever you take radiographs you consider [consciously and subconsciously] many factors including;

- Number of radiographs required
- Different views required
- Factors required to get good quality
- Developing required to get good quality
- Storage for the required minimum THREE years [as with all records].
- And labels. The labels must contain all the information to allow another veterinary practitioner to take over the case [see code of conduct requirements below]. So you need
 - o Identification of the animal
 - o Date
 - o Left or right marker

*Veterinary Practice Regulation 2006
Schedule 2
Veterinary practitioners code of professional conduct (Clause 13)
15 Records
(1) A veterinary practitioner must ensure that a detailed record of any consultation, procedure or treatment is made as soon as is practicable.
(2) The record:
(a) Must be legible and in sufficient detail to enable another veterinary practitioner to continue the treatment of the animal, and*

(b) Must include the results of any diagnostic tests, analysis and treatments.

(3) A veterinary practitioner must ensure that all records of any consultation, procedure or treatment are retained for at least 3 years after they are made.

Many veterinary practitioners think the Board has an interest in radiographs because they might show misdiagnosis or missed diagnoses BUT they show the veterinary practitioner these things at the time the animal is in your care... in this way good diagnostic radiographs are useful at protecting vets from allegations.

Radiographic documentation of your orthopedic procedures (closed or surgical fixations) is very important.

- You can determine if the animal is healing in the way you would expect.
- You can show what a great job you did in the first place. This is important if things are going badly subsequently. Everyone has experienced the cases where the owner has not carried out instructions concerning aftercare and things are starting to ‘fall apart’. Your radiographs will certainly be helpful for you.
- It is also helpful in being able to more easily detect the early signs of infection if it is developing.

News of Veterinary Science at Charles Sturt University, Wagga Wagga

The CSU Veterinary Diagnostic Laboratory now has extensive parasitological and histopathology capacity. The histology laboratory is well serviced by high quality Shandon processing equipment including a cryotome, automated stainer and solvent recycling equipment. Our lab is well managed by our Laboratory Technician Mr Joe Farish who in the process of developing immunohistochemical staining capacity for the most common cell membrane markers. We can now perform on-site processing particularly of research material from a wide variety of animal species and a histopathology diagnostic service for veterinary practices in the region is well on its way to full capacity. We have also taken delivery of our key biochemistry and haematology analysers which will be housed in a temporary home until our new building is completed. A number of new laboratory staff will be joining us soon, we are about to interview for the Laboratory Manager position who will have a key oversight for the development of microbiology, haematology and biochemistry diagnostic provisions. We currently also have positions open in Veterinary Clinical Pathology and Veterinary Microbiology.

Our multihead microscope room is now fully functional with digital microscopy that permits students to view and discuss gross lesions and histopathology sections. We will soon be holding pathology rounds in this room for practitioners wanting to see and learn more about cytology and histopathology.

The architectural design of the new building is progressing well with final confirmation of floor plans and site relief soon to take place. The building will have a large PC2 large animal necropsy room attached to service labs for microbiology, parasitology, histology, clinical pathology and molecular diagnostics. At the centre of the building we will have a PC3 microbiology laboratory to facilitate the culturing of category 3 microorganisms.

Dr Shane Raidal
Associate Professor in Veterinary Pathobiology
Director CSU Veterinary Diagnostic Laboratory
Charles Sturt University, Wagga Wagga

Report from the Faculty of Veterinary Science, The University of Sydney

One of the very enjoyable aspects of being a member of the Faculty is attending the BVSc graduation ceremony every December. It is indeed an honour to attend this ceremony regularly and be able to extend congratulations to the new veterinarians and their families. The graduation ceremony last December was even more special than usual, as it was the first time that the veterinary graduates took an oath to provide the best care for their patients and to contribute to the veterinary profession. The NSW Veterinary Practitioners Board (VPB) and the Registrar Mr. Glenn Lynch, with Faculty input, wrote the oath. At graduation the graduates recited the oath after the President of the NSW VPB, Dr Garth McGilvray. Many

of the Faculty veterinarians were also upstanding and took this oath along with the graduates, as it was the first time that we too, had the opportunity to do so. Additionally, another first for last year's ceremony, was the presence of the Governor of NSW and newly appointed Chancellor of the University, Her Excellency, Professor Marie Bashir who presented graduates with their testamurs and impressed all whom she met with her sincerity and warmth.

A new academic year has commenced and it is a very exciting time for the Faculty. As soon as the students finished their examinations last November, builders moved in to install new diagnostic imaging equipment for the

University Veterinary Teaching Hospital, Sydney Campus (UVTHS) and commenced beautifying and refurbishing the dog section of the hospital so that it now matches the Valentine Charlton Cat Hospital in both facilities and appearance. The canine centre is near to completion and the Faculty will hold a variety of functions to celebrate its opening between March and May.

The new digital imaging suite in the UVTHS is now fully operational. The suite includes computerised radiography (CR), making radiographic film and developer obsolete. The new CT (computed tomography; a.k.a CAT for computed axial tomography) scan is a Philips 16 slice helical scanner. The veterinary dedicated MRI (magnetic resonance imaging) unit is an Esaote Vet-MR Grande 0.8mT.

MRI is an excellent imaging modality for visualisation of central nervous system lesions. Newer applications include diagnosis of nasal neoplasia, eye and orbital diseases, musculoskeletal diseases including shoulder osteochondrosis, canine elbow dysplasia and cranial cruciate injuries. MRI also allows non-invasive diagnosis and localisation of vascular disease, including thrombi and portosystemic shunts.

CT also has many applications. Helical scan techniques allow minimisation of scan times, and therefore can be used for imaging of the lungs to look for pulmonary metastases and other lung pathology. Scan times are often only 2 to 5 minutes per patient. CT myelography largely replaces conventional myelography for imaging of the spinal cord. Three-dimensional

reconstructions of the skeleton allow detailed planning of surgery for patients, especially for those with musculoskeletal and oncological disease.

Archiving of the vast number of digital images generated from CR, CT, MRI and from the in-house Phillips HDI 5000 ultrasound machine is achieved through use of the newly installed picture archiving computer system (PACS). Images are managed in a secure DICOM format. A film printer and CD burner is available for image reproduction.

Uses for the new imaging facilities are broad, ranging from advanced diagnostic investigations of small animal patients to clinical research. Last week there was much excitement, when a koala was brought in to undergo CT to investigate the structure of its nasal sinuses as it had nasal cryptococcosis, a not uncommon fungal infection in koalas. Advanced diagnostic imaging of our native species is extremely rare and from the 3D images obtained from the patient's head, they indicated that there is much more to discover concerning the normal and abnormal anatomy of animals using this technology. All the staff of the Faculty look forward to the possibilities offered by this new equipment for diagnosing diseases and / or dysfunction in companion animals as well as many other animal species.

New staff joining the UVTHS in 2008 include Professor of Diagnostic Imaging Robert Wrigley, Director of Orthopaedic Services Professor Ken Johnston and Senior Lecturer in Small Animal Medicine Dr Linda Fleeman.

Dr Merran Govendir and Dr Vanessa Barrs.

**Emergency - Animal Disease
Watch Hotline**

1800 675 888

Report Unusual Disease Signs, Abnormal
Behaviour or Unexplained Deaths

Abandoned animals.

This isn't in the Act and is not Board policy- simply commonsense approach that you might find useful.

The issue of clients not returning to pick up treated animals is one every veterinarian in practice has, sadly, faced. Veterinarians often call the Board's office seeking guidance but our advice can only be general and is along the lines of the advice issued by the Australian Veterinary Association several years ago. This isn't in the Act or even Board Policy - just commonsense we think.

Prevention

Firstly ensure admission forms and records include as many details as possible about the client such as home and work phone numbers (the increasing numbers of clients who have mobiles only is a real problem) and a street address (not just a post office box). Ensure as best you can that you are dealing with the owner or a person with authority to request the treatment. Ensure permission forms regarding all estimated costs are explained and signed. The Board is aware that many hospital admission / consent forms at the bottom, ask 'how do you propose to pay for this account? Tick boxes with cash, credit card, eftpos, cheque. We know this doesn't stop those who simply want to dump the animal but at least you are doing your best towards prevention and are attempting to gain a commitment from the client.

If the animal has not been collected at the arranged time, attempt to contact the owner by phone to politely inform them of the pet's progress and that the animal is now ready to go home. If you are able to get onto the client and they are reluctant to pick up the animal because of lack of funds you will need to work out options. In considering whether to hold onto the animal waiting for payment, remember:

1. You have to feed/water/look after the animal at your cost
2. The issue sometimes is seen as using the animal for blackmail
3. What happens after a month, three months or a year

Much better to get them to come in, maybe take the animal and work out a payment plan that will achieve payment in full within a time you consider reasonable. Reduce the agreement to writing and put in an acknowledgment that if an instalment is late by more than seven days, the remaining balance is then due and that Court proceedings may then be taken.

Further Action

What if the phone is disconnected? Next step would be a letter, posted to any address you have, and even hand-delivered if that is possible. In this letter you need to state again the animal's progress, include a detailed account, and invite immediate contact. The letter should set a deadline after which the animal would be considered abandoned and you would then be free to deal with the animal as you think best, and the options can include sending to the pound, re-homing or euthanasia, in your discretion.

If you don't hear from them, you could write again after the deadline telling them what you have done, but that is optional.

If you can't contact the client by post or by phone, after a certain period you will simply have to say "enough" and re home, euthanase or surrender the animal. What length of time that is and which alternative you choose, will depend on your assessment of all the circumstances.

Professional Development Requirements

“I work in a small practice and have family responsibilities and it isn’t easy to get time off to go to courses. My colleagues in rural areas tell me that they are having trouble getting to courses too so shouldn’t the Board reconsider the ‘structured’ Professional Development requirements?”

As a professional, there is an ongoing commitment to maintain and enhance professional skills and knowledge and this is reiterated in the Code of Conduct.

*Veterinary Practice Regulation 2006 Schedule 2
Veterinary practitioners code of professional conduct (Clause 13)*

4 Knowledge of current standards of practice

(1) A veterinary practitioner:

(a) must maintain knowledge to the current standards of the practice of veterinary science in the areas of veterinary science relevant to his or her practice, and

(b) must always carry out professional procedures in accordance with those current standards.

(2) A veterinary practitioner must base professional decisions on evidence-based science or well-recognised current knowledge and practice, or both

In many professions, demonstration of ongoing CPD is a condition of continuing registration but our legislation requires recording of CPD. In the event of a complaint against a veterinarian the information could be very useful for the veterinarian’s defence.

The minimal level of participation in continuing professional development has been agreed to be 60 points over three years. At least 15 points must be obtained from structured learning and the remaining 45 points can be obtained from unstructured learning or more structured learning. There is no doubt that attendance at the longer courses and annual conferences more rapidly gives you the necessary points but there are other ways as well.

- Have you looked at the availability of courses via the Internet? While some are lengthy year long courses, there are some which can be covered with a couple of hours work each week over say, 8 weeks.

- The Royal Veterinary College [UK] and Vet Med Team Team [USA] offer internet or “e-CPD” courses and can be found easily at the [free] International Veterinary Information Services site www.ivis.org/shortcourse.

- Closer to home [not that distance is the issue with these courses!] the Post Graduate Foundation at www.pgf.edu.au offers short online courses and regularly seeks interest for future courses You can email pgf.timeonline@usyd.edu.au if you have any suggestions.

- The staff of the Royal Veterinary College believe their e-CPD courses to be suitable for NSW practitioners. If you want to try a “taster session” then check the site <http://www.rvc.ac.uk/CPD/eCPD.cfm>. Their “Diagnostic Dilemmas” live online lectures series are held 1:00-3:00 pm British Time (GMT during February, March, November and December; British Summer Time April-October). This period includes a 30-minute registration and familiarisation period prior to the commencement of the lecture. If NSW practitioners were interested in this series, then recorded lectures might be possible. <http://www.rvc.ac.uk/CPD/Course.cfm?course=185>.

Confidential Help for Veterinarians

Doctors Health Advisory Service

Independent and confidential service staffed by specially selected and trained medical practitioners who are able to offer personal and health assistance as well as referral to specialists. Veterinary practitioners / their families / their colleagues are able to make calls to the Help Line. Issues vary and all calls are unique but may involve depression, alcohol abuse, drug use, work related stress or marriage difficulties. This highly respected and leading health care advisory organization aims to assist veterinarians to maintain full personal, professional and social capability. The dedicated telephone service is available 24 hours a day.

(02) 9437 6552

Professional Development Requirements continued

For more information on what the Royal Veterinary College can offer contact mhodgson@rvc.ac.uk

- Written assessments in some journals are available.

- Most AVA branches would welcome your attendance at their meetings even if you were not an AVA member, [although an extra fee would be expected]. If a rural branch had a guest speaker for 4 hours a year you could have 12 structured points over 3 years from that alone. Regional AVA meetings are organised every couple of years over 2-3 days and part attendance at one of these may be more feasible than a trip to a capital city.

- Were you involved in the EI training programs? Likely to have done at least a couple of hours training over the last few months if you are a rural vet.

Don't stress. Please contact the Board if you are worried and we will see if we can assist in pointing you in the right direction. One of the hardest things is to record the information. Try and do it regularly as it is hard to recall at the end of the year when the annual return is required. If you don't record it regularly, you are likely to forget some of the things you have done.

1300 366 653

**New telephone number for
Veterinary Practitioners Board**

1300 366 653

*You can use this number to contact the
New South Wales Veterinary
Practitioners Board from ANYWHERE
within Australia for the cost of a local
call.*

1300 366 653

Boardtalk

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IMPORTANT:

The information contained in this newsletter reflects the policies of the Veterinary Practitioners Board and the current NSW legislation. Any advice on specific issues not relating to Board policy should be obtained from either the AVA or appropriate government department or your own legal advisors